

Massachusetts Department of Public Health Office of Preparedness and Emergency Management

HPP/PHEP Multi-year Training and Exercise Plan
August 2014

PREFACE

The DPH HPP/PHEP Multiyear TEP is the roadmap for DPH to move towards meeting the priorities and capabilities presented in the Hospital Preparedness Program (HPP) and Public Health Emergency Preparedness (PHEP) Cooperative Agreement administered by the Centers for Disease Control (CDC) and Prevention and the Office of the Assistant Secretary of Preparedness and Response (ASPR). DPH has implemented a coordinated all-hazard strategy that combines enhanced planning, innovative training, and realistic exercises to strengthen DPH's ability to prepare for, respond to and rapidly recover from health security incidents and emergencies. Training and exercises play a crucial role in this strategy, providing DPH with a means of attaining, practicing, validating, and improving new capabilities.

DPH's training and exercise programs are administered by the Office of Preparedness and Emergency Management (OPEM). The training and exercise agenda described in this plan is to be used as a guide for all DPH response agencies and stakeholders receiving CDC PHEP and HPP funds. The plan helps prepare DPH to optimally address both the natural and technical hazards that it faces.

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PURPOSE

The purpose of the DPH HPP/PHEP Multiyear Training and Exercise Plan (TEP) is to outline the exercises and trainings that will help state and local public health and healthcare entities to move towards meeting the priorities and capabilities presented in the Hospital Preparedness Program (HPP) and Public Health Emergency Preparedness (PHEP) Cooperative Agreement administered by the Centers for Disease Control and Prevention (CDC) and the Office of the Assistant Secretary for Preparedness and Response (ASPR). Each planned activity is linked to a corresponding HPP or PHEP capability and in some cases joint activities are planned to encourage collaboration between the public health and healthcare communities. Where applicable, previous related exercises and/or improvement plan items are identified. The majority of the trainings identified are a result of assessments conducted with local public health and healthcare entities that identified trainings needed to help build our capabilities. Most of these trainings will be conducted through the 2 education and training centers that are funded by DPH and as we continue to build our capabilities the level of training will increase as well. In addition, all exercises will include local stakeholders in the planning process to ensure their needs are met and to help increase their capabilities as well.

Included in the DPH HPP/PHEP Multiyear TEP are the training and exercise schedules which provide graphic illustration of the proposed activities, planned for the years 2014-2017. They are representative of the natural progression of training and exercises that should take place in accordance with the Homeland Security Exercise and Evaluation Program (HSEEP) building-block approach.

PROGRAM PRIORITIES

Based on the HPP and PHEP Work Plans DPH developed to begin meeting the priorities and requirements of each of the associated capabilities, below are the planned activities for the years 2012-2013. In addition, where applicable, some activities in this plan are based upon Hazard and Vulnerability Assessments, Corrective Actions identified in previous After Action Reports, and the objectives defined in the Statewide Homeland Security Strategy for the Commonwealth.

Capability - Community Preparedness (PHEP)

Definition: Community preparedness is the ability of communities to prepare for, withstand, and recover — in both the short and long terms — from public health incidents. By engaging and coordinating with emergency management, healthcare organizations (private and community-based), mental/behavioral health providers, community and faith-based partners, state, local, and territorial, public health's role in community preparedness is to do the following:

Support the development of public health, medical, and mental/behavioral health systems that support recovery

Participate in awareness training with community and faith-based partners on how to prevent, respond to, and recover from public health incidents

Promote awareness of and access to medical and mental/behavioral health resources that help protect the community's health and address the functional needs (i.e., communication, medical care, independence, supervision, transportation) of at-risk individuals

Engage public and private organizations in preparedness activities that represent the functional needs of at-risk individuals as well as the cultural and socio-economic, demographic components of the community

Identify those populations that may be at higher risk for adverse health outcomes

Receive and/or integrate the health needs of populations who have been displaced due to incidents that have occurred in their own or distant communities (e.g., improvised nuclear device or hurricane)

Training Courses and Exercises that Support this Capability:

- Training – Emergency Planning for the Diverse Needs of Communities
- Training – Individual's Requiring Additional Assistance (online)
- Training – Community Preparedness (online)
- Training – Hazard Vulnerability (HVA) Planning: Awareness (online)
- Training – Emergency Preparedness Begins at Home (online)
- Training – Emergency Preparedness in Massachusetts (online)
- Exercise – Shaping the Future of Statewide Training Workshop
- Exercise – TTX for DPH Offices and Bureaus

Capability - Healthcare Systems Preparedness (HPP)

Definition: Healthcare system preparedness is the ability of a community's healthcare system to prepare, respond, and recover from incidents that have a public health and medical impact in the short and long term. The healthcare system role in community preparedness involves coordination with emergency management, public health, mental/behavioral health providers, community and faith-based partners, state, local, and territorial governments to do the following:

Provide and sustain a tiered, scalable, and flexible approach to attain needed disaster response and recovery capabilities while not jeopardizing services to individuals in the community

Provide timely monitoring and management of resources

Coordinate the allocation of emergency medical care resources

Provide timely and relevant information on the status of the incident and healthcare system to key stakeholders

Improvement Plan Reference:

- Regional Hospital CHEMPACK/HazMat TTX series
- 2012 Regional Coalition Exercise Mini-Series
- 2012 Regional Surge Functional Exercises
- 2013 Regional Recovery TTX
- 2014 Statewide Coalition TTX

Training Courses, Exercises and Planned Events that Support this Capability:

- Training – Individual's Requiring Additional Assistance (online)
- Training – Basic Risk Communications (NWCPHP online)
- Training – Hazard Vulnerability Analysis Planning: Awareness (online)
- Training – Emergency Operations Planning: Awareness (online)
- Training – Emergency Risk Communications in Practice
- Training – Incident Management for Hospitals (online)
- Training – Applying ICS to Your Health Care Emergency Response
- Training - Basic and Advanced Disaster Life Support
- Training – All Hazards Disaster Response & Protection for Hospital Personnel – Awareness Modules I & II (classroom), Module I (webinar)
- Training – Emergency Planning for the Diverse Needs of Communities
- Exercise – Shaping the Future of Statewide Training Workshop
- Exercise – Regional Critical Infrastructure Failure FE (BP4)
- Planned Event – Boston Marathon

Capability - Community Recovery (PHEP)

Definition: Community recovery is the ability to collaborate with community partners, (e.g., healthcare organizations, business, education, and emergency management) to plan and advocate for the rebuilding of public health, medical, and mental/behavioral health systems to at least a level of functioning comparable to pre-incident levels, and improved levels where possible.

Training Courses that Support this Capability:

- Community Recovery – Awareness Level (online)

Capability - Healthcare System Recovery (HPP)

Definition: Healthcare system recovery involves the collaboration with Emergency Management and other community partners, (e.g., public health, business, and education) to develop efficient processes and advocate for the rebuilding of public health, medical, and mental/behavioral health systems to at least a level of functioning comparable to pre-incident levels and improved levels where possible. The focus is an effective and efficient return to normalcy or a new standard of normalcy for the provision of healthcare delivery to the community.

Improvement Plan Reference:

- H1N1 Spring 2009 AARs
- Spring 2013 Regional Recovery Workshop AARs
- 2013 Regional Recovery TTX

Training Courses and Exercises that Support this Capability:

- Training – Continuity of Operations Planning: Awareness Level (online)
- Training – Healthcare Recovery Planning (online)
- Exercise – Regional Critical Infrastructure Failure FE (BP4)
- Exercise – TTX for DPH Offices and Bureaus

Capability – Emergency Operations Coordination (HPP and PHEP)

HPP Definition: Emergency operations coordination regarding healthcare is the ability for healthcare organizations to engage with incident management at the Emergency Operations Center or with on-scene incident management during an incident to coordinate information and resource allocation for affected healthcare organizations. This is done through multi-agency coordination representing healthcare organizations or by integrating this coordination into plans and protocols that guide incident management to make the appropriate decisions. Coordination ensures that the healthcare organizations, incident management, and the public have relevant and timely information about the status and needs of the healthcare delivery system in the community. This enables healthcare organizations to coordinate their response with that of the community response and according to the framework of the National Incident Management System (NIMS).

PHEP Definition: Emergency operations coordination is the ability to direct and support an event or incident with public health or medical implications by establishing a standardized, scalable system of oversight, organization, and

supervision consistent with jurisdictional standards and practices and with the National Incident Management System.

Prior Exercise or Improvement Plan Reference:

- H1N1 AARs from Spring 2009 and Fall/Winter 2009-2010
- June 1, 2011 Tornado AAR
- Tropical Storm Irene AAR
- October 29, 2011 Snow Storm
- Boston Marathon AARs 2009, 2010 and 2011, 2012, 2014
- Regional Hospital Surge TTX series Spring 2011
- Prior Department Operation Center (DOC) Drills
- Hurricane Sandy AAR
- 2012 Regional Surge FE series AARs
- 2013 Regional Recovery TTX
- 2014 Statewide Coalition TTX
- 2014 State level Fatality Management TTX
- 2014 State level Disaster Behavioral Health TTX

Training Courses, Exercises and Planned Events that Support this Capability:

- Training – Continued training on appropriate levels of ICS for both public health and healthcare personnel
- Training – Applying ICS to Your Health Care Emergency Response
- Training – Incident Management for Hospitals (online)
- Training – Emergency Operations Planning: Awareness (online)
- Training – Healthcare System Emergency Management System Overview (online)
- Training – On-line and classroom training for WebEOC for Local Public Health and other healthcare partners (as needed)
- Exercise – Regional Critical Infrastructure Failure FE (BP4)
- Exercise – TTX for DPH Offices and Bureaus
- Exercise - Regional Emergency Dispensing Site (EDS) Workshops
- Exercise – Joint HPP-PHEP MCM Dispensing TTX (BP4)
- Exercise – Joint HPP-PHEP MCM Dispensing FSE (BP5)

- Exercise – Resource Request Process Drills for Local Public Health and Hospitals
- Exercise – Seminar for Emergency Operations Plan Update
- Exercise – Quarterly DOC Activation Drills
- Planned Event – Boston Marathon

Capability – Emergency Public Information and Warning (PHEP)

Definition: Emergency public information and warning is the ability to develop, coordinate, and disseminate information, alerts, warnings, and notifications to the public and incident management responders.

Prior Exercise or Improvement Plan Reference:

- H1N1 AARs from Spring 2009 and Fall/Winter 2009-2010
- MWRA Water Incident

Training Courses that Support this Capability:

- Training – Basic Risk Communications (NWCPHP online)
- Training – Emergency Risk Communication in Practice
- Training – Using the Health and Homeland Alert Network (HHAN) (online)

Capability – Fatality Management (HPP)

Definition: Fatality management is the ability to coordinate with organizations (e.g., law enforcement, healthcare, emergency management, and medical examiner/coroner) to ensure the proper recovery, handling, identification, transportation, tracking, storage, and disposal of human remains and personal effects; certify cause of death; and facilitate access to mental/behavioral health services for family members, responders, and survivors of an incident. Coordination also includes the proper and culturally sensitive storage of human remains during periods of increased deaths at healthcare organizations during an incident.

Prior Exercise or Improvement Plan Reference:

- Regional Fatality Management TTXs 2011
- 2014 State level Fatality Management TTX

Training Courses and Exercises that Support this Capability:

- Exercise – TTX for DPH Offices and Bureaus

Capability – Information Sharing (HPP and PHEP)

HPP Definition: Information sharing is the ability to conduct multijurisdictional, multidisciplinary exchange of public health and medical related information and situational awareness between the healthcare system and local,

state, Federal, tribal, and territorial levels of government and the private sector. This includes the sharing of healthcare information through routine coordination with the Joint Information System for dissemination to the local, state, and Federal levels of government and the community in preparation for and response to events or incidents of public health and medical significance.

PHEP Definition: Information sharing is the ability to conduct multijurisdictional, multidisciplinary exchange of health-related information and situational awareness data among federal, state, local, territorial, and tribal levels of government, and the private sector. This capability includes the routine sharing of information as well as issuing of public health alerts to federal, state, local, territorial, and tribal levels of government and the private sector in preparation for, and in response to, events or incidents of public health significance.

Prior Exercise or Improvement Plan Reference:

- H1N1 AARs from Spring 2009 and Fall/Winter 2009-2010
- Regional Hospital Evacuation TTX series 2011
- Regional Hospital Surge TTX series 2011 and FE series 2012
- June 1, 2011 Tornado AAR
- Tropical Storm Irene AAR
- Regional CHEMPACK/HazMat TTX series 2012
- Hurricane Sandy AAR
- 2013 Regional Recovery TTX
- 2014 Statewide Coalition TTX
- 2014 State level Fatality Management TTX
- 2014 State level Disaster Behavioral Health TTX

Training Courses, Exercises and Planned Events that Support this Capability:

- Training – Using the Health and Homeland Alert Network (HHAN) (online)
- Training – Continued training for local public health on the Massachusetts Virtual Epidemiologic Network (MAVEN)
- Training – On-line and classroom training for WebEOC for Local Public Health and other healthcare partners (as needed)
- Exercise – Regional Critical Infrastructure Failure FE (BP4)
- Exercise – TTX for DPH Offices and Bureaus
- Exercise – Annual MassMAP regional LTC/ALF mutual aid/surge drills
- Exercise - Regional Emergency Dispensing Site (EDS) Workshops
- Exercise – Joint HPP-PHEP MCM Dispensing TTX (BP4)
- Exercise – Joint HPP-PHEP MCM Dispensing FSE (BP5)

- Planned Event – Boston Marathon

Capability – Mass Care (PHEP)

Definition: Mass care is the ability to coordinate with partner agencies to address the public health, medical, and mental/ behavioral health needs of those impacted by an incident at a congregate location. This capability includes the coordination of ongoing surveillance and assessment to ensure that health needs continue to be met as the incident evolves.

Prior Exercise or Improvement Plan Reference:

- June 1, 2011 Tornado AARs
- Tropical Storm Irene AARs
- October 29, 2011 Snow Storm AARs
- Hurricane Sandy AAR

Training Courses and Exercises that Support this Capability:

- Training – Introduction to Shelter Operations for MRC Volunteers
- Training – Environmental Health and Safety Assessment in Shelters
- Training – Dealing with Stress in Disasters: Building Psychological Resilience (online)

Capability – Medical Countermeasure Dispensing (PHEP)

Definition: Medical countermeasure dispensing is the ability to provide medical countermeasures (including vaccines, antiviral drugs, antibiotics, antitoxin, etc.) in support of treatment or prophylaxis (oral or vaccination) to the identified population in accordance with public health guidelines and/or recommendations.

Prior Exercise or Improvement Plan Reference:

- After Action Reports from prior local public health Emergency Dispensing Site (EDS) exercises and flu-clinics
- H1N1 vaccine distribution clinics and resulting AARs
- Previous DSNS operational drills that are required annually by CDC

Training Courses and Exercises that Support this Capability:

- Training – EDS Management (online)
- Exercises – 3 MCM Drills as required for the CRI planning jurisdictions
- Exercise - TTX for DPH Offices and Bureaus
- Exercise - Regional Emergency Dispensing Site (EDS) Workshops

- Exercise – Joint HPP-PHEP MCM Dispensing TTX (BP4)
- Exercise – Joint HPP-PHEP MCM Dispensing FSE (BP5)

Capability – Medical Materiel Management and Distribution (PHEP)

Definition: Medical materiel management and distribution is the ability to acquire, maintain (e.g., cold chain storage or other storage protocol), transport, distribute, and track medical materiel (e.g., pharmaceuticals, gloves, masks, and ventilators) during an incident and to recover and account for unused medical materiel, as necessary, after an incident.

Prior Exercise or Improvement Plan Reference:

- Operation Eagle full scale distribution exercise AAR
- H1N1 AARs from Spring 2009 and Fall/Winter 2009-2010
- Operation ME (Maximum Efficiency) TTX AAR
- Operation Eagle II TTX and FSE AARs

Training Courses and Exercises that Support this Capability:

- Exercise – Quarterly call down drills

Capability – Medical Surge (HPP) –

Definition: The Medical surge capability is the ability to provide adequate medical evaluation and care during incidents that exceed the limits of the normal medical infrastructure within the community. This encompasses the ability of healthcare organizations to survive an all-hazards incident, and maintain or rapidly recover operations that were compromised.

Prior Exercise or Improvement Plan Reference:

- H1N1 AARs
- Regional Hospital Surge TTX series 2011 AAR
- 2013 Northeast Tertiary Care Facilities Coalition TTX and FE AARs
- 2014 Regional Recovery TTX

Exercises that Support this Capability:

- Exercise – Regional Critical Infrastructure Failure FE (BP4)

Capability – Non-Pharmaceutical Interventions (PHEP)

Definition: Non-pharmaceutical interventions are the ability to recommend to the applicable lead agency (if not public health) and implement, if applicable, strategies for disease, injury, and exposure control. Strategies include the following:

- Isolation and quarantine
- Restrictions on movement and travel advisory/warnings
- Social distancing
- External decontamination
- Hygiene
- Precautionary protective behaviors

Prior Exercise or Improvement Plan Reference:

- H1N1 AARs

Training Courses that Support this Capability:

- Training – Legal Nuts and Bolts of Isolation and Quarantine Part I and II

Capability – Public Health Laboratory Testing (PHEP)

Definition: Public health laboratory testing is the ability to conduct rapid and conventional detection, characterization, confirmatory testing, data reporting, investigative support, and laboratory networking to address actual or potential exposure to all-hazards. Hazards include chemical, radiological, and biological agents in multiple matrices that may include clinical samples, food, and environmental samples (e.g., water, air, and soil). This capability supports routine surveillance, including pre-event or pre-incident and post-exposure activities.

Prior Exercise or Improvement Plan Reference:

- H1N1 Spring 2009 AAR
- Results from prior CDC required exercises and performance measures

Training Courses and Exercises that Support this Capability:

- Training – LRN training for hospital laboratory staff
- Exercises – Exercises in conjunction with the CDC for Performance Measure requirements

Capability – Public Health Surveillance and Epidemiological Investigation (PHEP)

Definition: Public health surveillance and epidemiological investigation is the ability to create, maintain, support, and strengthen routine surveillance and detection systems and epidemiological investigation processes, as well as to expand these systems and processes in response to incidents of public health significance.

Prior Exercise or Improvement Plan Reference:

- H1N1 Spring 2009 and Fall/Winter 2009-1010 AARs

Training Courses that Support this Capability:

- Training – Massachusetts Virtual Epidemiologic Network (MAVEN) (in person; webinar and online)
- Training – Surveillance of Infectious Diseases (online)

Capability – Responder Safety and Health (HPP and PHEP)

Definition: The responder safety and health capability describes the ability of healthcare organizations to protect the safety and health of healthcare workers from a variety of hazards during emergencies and disasters. This includes processes to equip, train, and provide other resources needed to ensure healthcare workers at the highest risk for adverse exposure, illness, and injury are adequately protected from all hazards during response and recovery operations.

Prior Exercise or Improvement Plan Reference:

- Regional CHEMPACK/HazMat TTX series 2012

Training Courses that Support this Capability:

- Training – All Hazards Disaster Response and Protection for Healthcare Workers – Awareness and Operations Levels
- Training – Public Health Workforce Protection (online)
- Exercise – TTX for DPH Offices and Bureaus
- Exercise - Regional Emergency Dispensing Site (EDS) Workshops
- Exercise – Joint HPP-PHEP MCM Dispensing TTX (BP4)
- Exercise – Joint HPP-PHEP MCM Dispensing FSE (BP5)

Capability – Volunteer Management (HPP and PHEP)

HPP Definition: Volunteer management is the ability to coordinate the identification, recruitment, registration, credential verification, training, engagement, and retention of volunteers to support healthcare organizations with the medical preparedness and response to incidents and events.

PHEP Definition: Volunteer management is the ability to coordinate the identification, recruitment, registration, credential verification, training, and engagement, of volunteers to support the jurisdictional public health agency's response to incidents of public health significance.

Prior Exercise or Improvement Plan Reference:

- Regional Hospital Surge TTX series 2011
- MRC Communications TTX 2011 and 2013
- Hurricane Irene AAR
- Hurricane Sandy AAR

Training Courses and Exercises that Support this Capability:

- Training – Administrator Training for MA Responds
- Training - Annual Educational Preparedness Program for Volunteers by MA Medical Society
- Exercise - Communications TTX for MRC Unit Leaders
- Exercise – MA Responds Drill

METHODOLOGY AND TRACKING

DPH has adopted the Homeland Security Exercise and Evaluation Program (HSEEP) for its training and exercise program. With this in mind, our priorities for training and exercising follow the HSEEP building block approach by ensuring appropriate training and solid plans are in place before conducting more complex discussion or operation based exercises.

As plans are updated, workshops will be convened to formulate the plan utilizing input from all the stakeholders. Once the plans are complete, any training that may be necessary will be conducted and seminars will be held to disseminate the plan. The seminars will be followed by a more complex discussion based exercise, such as a tabletop, then move to functional and full-scale exercises as appropriate.

At the conclusion of each exercise, an After Action Report/Improvement Plan (AAR/IP) will be completed and we will track the implementation of corrective actions. We will also utilize the Lessons Learned Information Sharing (LLIS) website to post relative lessons learned and best practices from our exercises.

Even though this is the Multi-year Exercise and Training Plan for the DPH, all real-world events and pre-planned events will be followed by a debrief of the event and the creation of an After Action Report/Improvement Plan (AAR/IP). The AAR/IPs from real-world and pre-planned events will also be tracked in order for the department to continue to build its capability.

The After Action Report/Improvement Plan (AAR/IP)

The purpose of the After Action Report (AAR) is to summarize the events of an exercise (or real-world incident) and contains an analysis of performance. An exercise AAR contains analysis of an entity's ability to accomplish tasks, achieve exercise objectives and demonstrate capabilities. A real-world incident AAR presents analysis of how an entity performed in response to an incident and provides candid discussion of lessons learned and improving future performance. The Improvement Plan (IP) section of an AAR includes corrective actions for improvement, timelines for implementation and specific points of contact.

MULTI-YEAR TRAINING AND EXERCISE SCHEDULE

The attached Training and Exercise Schedules depict the exercises and trainings that will take place or be offered from July 2014 to June 2017 for the Massachusetts Department of Public Health and its public health and healthcare partners. As noted previously and evidenced on the schedule, DPH is committed to following the HSEEP building block approach for all training and exercises which will increasingly build in complexity. As we continue to build our capabilities and formulate our healthcare coalitions, this plan will be updated annually to reflect such increases in all HPP and PHEP capabilities.

Commonwealth of Massachusetts
2014-2015 Exercises (BP3)

EXERCISE	Exercise Dates	POC and Contact Info	Scope	Type	Capabilities	Previous Related Exercises	Supports HPP or PHEP Requirement	Sponsor	Objectives	Planning Conference Dates
Regional Critical Infrastructure Failure FE series	Fall 2014	Roberta Crawford roberta.crawford@state.ma.us	State, local and regional	FE	-Emergency Operations Coordination -Information Sharing -Healthcare System Preparedness -Healthcare System Recovery -Medical Surge	Healthcare Recovery TTX series	Participation in a Regional FE that includes Capabilities 3 and 6 and components of Capability 10	DPH, OPEM	Evaluate the ability of hospitals to recover from an incident within the region; while providing command and control; sharing of information and resources and collaborating with stakeholders	TBD
TTX for DPH Offices and Bureaus	Winter 2015	Roberta Crawford roberta.crawford@state.ma.us	State level	TTX	-Community Preparedness -Community Recovery -Emergency Operations Coordination -Fatality Mgn't -Information Sharing -Medical Countermeasure Dispensing -Responder Safety and Health	N/A	N/A	DPH, OPEM	Evaluate the ability of DPH Offices and Bureaus to coordinate health response and recovery efforts during a statewide public health emergency	TBD

Regional EDS Workshops	Spring 2015	Roberta Crawford roberta.crawford@state.ma.us	State, local and regional	Workshop	-Emergency Operations Coordination -Information Sharing -Medical Countermeasure Dispensing -Responder Safety and Health	N/A	Joint Exercise Requirement for HPP and PHEP	DPH, OPEM	Assist HMCC stakeholders in creating Regional EDS Plans	
Quarterly DOC Activation Drills	Quarterly	Roberta Crawford roberta.crawford@state.ma.us	State	Drill	-Emergency Operations Coordination	Previous DOC drills	Performance Measure	DPH, OPEM	Test the time for staff with public health incident management functional responsibilities to assemble at the DOC	N/A
Quarterly SNS Comms/Call Down Drills	Quarterly	Roberta Crawford roberta.crawford@state.ma.us	State and private	Drill	-Medical Materiel Management and Distribution	Previous SNS drills	TAR requirement	DPH, OPEM	Test the ability to contact SNS/RSS staff and for them to confirm receipt of notification	N/A
3 DSNS Operational Drills	Varies by jurisdiction	Roberta Crawford roberta.crawford@state.ma.us	Local	Drill	-Medical Countermeasure Dispensing	Previous Operational Drills	MCMDD	Local Health	Test the time to notify EDS staff of a public health emergency and establish a baseline for length of time to respond to the EDS; Test the ability to notify the EDS facility of the need to activate and establish an estimated timeframe of availability; Test the ability of EDS staff to set up the EDS facility and/or Test the Dispensing Throughput of the EDS facility	Varies by jurisdiction
Laboratory Exercises and Drills in conjunction with CDC	Varies according to CDC	CDC	State Laboratory personnel	Drills	-Public Health Laboratory Testing	Previous Laboratory Drills	Performance Measure	CDC	Varies according to the drill	Determined by CDC

Commonwealth of Massachusetts
2015-2016 Exercises (BP4)

EXERCISE	Exercise Dates	POC and Contact Info	Scope	Type	Capabilities	Previous Related Exercises	Supports HPP or PHEP Requirement	Sponsor	Objectives	Planning Conference Dates
Joint HPP-PHEP MCM Dispensing TTX	Winter 2016	Roberta Crawford roberta.crawford@state.ma.us	State, local and regional	TTX	-Emergency Operations Coordination -Information Sharing -Medical Countermeasure Dispensing -Community Preparedness -Healthcare Systems Preparedness	N/A	Joint Exercise Requirement for HPP and PHEP	DPH, EPB	Evaluate the ability of the Healthcare Coalitions and Public Health Depts. within the CRI/MSA to dispense MCM during an incident that impacts the Commonwealth	TBD
Quarterly DOC Activation Drills	Quarterly	Roberta Crawford roberta.crawford@state.ma.us	State	Drill	-Emergency Operations Coordination	Previous DOC drills	Performance Measure	DPH, EPB	Test the time for staff with public health incident management functional responsibilities to assemble at the DOC	N/A
Quarterly SNS Comms/Call Down Drills	Quarterly	Roberta Crawford roberta.crawford@state.ma.us	State and private	Drill	-Medical Materiel Management and Distribution	Previous SNS drills	TAR requirement	DPH, EPB	Test the ability to contact SNS/RSS staff and for them to confirm receipt of notification	N/A

3 DSNS Operational Drills	Varies by jurisdiction	Roberta Crawford roberta.crawford@ state.ma.us	Local	Drill	-Medical Countermeasure Dispensing	Previous Operational Drills	MCMDD	Local Health	Test the time to notify EDS staff of a public health emergency and establish a baseline for length of time to respond to the EDS; Test the ability to notify the EDS facility of the need to activate and establish an estimated timeframe of availability; Test the ability of EDS staff to set up the EDS facility and/or Test the Dispensing Throughput of the EDS facility	Varies by jurisdiction
Laboratory Exercises and Drills in conjunction with CDC	Varies according to CDC	CDC	State Laboratory personnel	Drills	-Public Health Laboratory Testing	Previous Laboratory Drills	Performance Measure	CDC	Varies according to the drill	Determined by CDC

Commonwealth of Massachusetts
2016-2017 Exercises (BP5)

EXERCISE	Exercise Dates	POC and Contact Info	Scope	Type	Capabilities	Previous Related Exercises	Supports HPP or PHEP Requirement	Sponsor	Objectives	Planning Conference Dates
Joint HPP-PHEP MCM Dispensing FSE	Spring 2017	Roberta Crawford roberta.crawford@state.ma.us	State, local and regional	FSE	-Emergency Operations Coordination -Information Sharing -Medical Countermeasure Dispensing -Community Preparedness -Healthcare Systems Preparedness	Joint HPP-PHEP MCM Dispensing TTX	Joint Exercise Requirement for HPP and PHEP	DPH, EPB	Evaluate the ability of the Healthcare Coalitions and Public Health Depts. within the CRI/MSA to dispense MCM during an incident that impacts the Commonwealth	TBD
Quarterly DOC Activation Drills	Quarterly	Roberta Crawford roberta.crawford@state.ma.us	State	Drill	-Emergency Operations Coordination	Previous DOC drills	Performance Measure	DPH, EPB	Test the time for staff with public health incident management functional responsibilities to assemble at the DOC	N/A
Quarterly SNS Comms/Call Down Drills	Quarterly	Roberta Crawford roberta.crawford@state.ma.us	State and private	Drill	-Medical Materiel Management and Distribution	Previous SNS drills	TAR requirement	DPH, EPB	Test the ability to contact SNS/RSS staff and for them to confirm receipt of notification	N/A

3 DSNS Operational Drills	Varies by jurisdiction	Roberta Crawford roberta.crawford@ state.ma.us	Local	Drill	-Medical Countermeasure Dispensing	Previous Operational Drills	MCMDD	Local Health	Test the time to notify EDS staff of a public health emergency and establish a baseline for length of time to respond to the EDS; Test the ability to notify the EDS facility of the need to activate and establish an estimated timeframe of availability; Test the ability of EDS staff to set up the EDS facility and/or Test the Dispensing Throughput of the EDS facility	Varies by jurisdiction
Laboratory Exercises and Drills in conjunction with CDC	Varies according to CDC	CDC	State Laboratory personnel	Drills	-Public Health Laboratory Testing	Previous Laboratory Drills	Performance Measure	CDC	Varies according to the drill	Determined by CDC

Commonwealth of Massachusetts
Trainings

TRAINING NAME	Dates Offered	Sponsor Agency	Target Audience	Type	Capabilities	Previous Related Exercises or other events
Dealing With Stress in Disasters; Building Psychological Resilience	On-line available anytime	Local Public Health Institute	State and local public health; healthcare workers; public safety	On-line	-Community Preparedness -Mass Care	Natural Hazard Events such as the June 1 st Tornado
Emergency Planning for the Diverse Needs of Communities	Nov 2014, April 2015	DelValle	State and local public health; healthcare workers; public safety	Classroom	-Community Preparedness -Healthcare System Preparedness	
All Hazards Disaster Response & Protection for Hospital Personnel – Awareness Modules I & II	Classroom: Sept; Nov 2014 & April 2015 Webinar: Jan, & June 2015	DelValle	Healthcare workers	Webinar and classroom	-Healthcare System Preparedness -Responder Safety and Health	Chempack/Haz Mat TTX series and previous Decon drills
Continuity of Operations Planning - Awareness	On-line available anytime	DelValle	State and local public health; healthcare workers; public safety	Online	-Community Recovery -Healthcare System Recovery	H1N1
ICS courses	On-line available anytime Level 300 and 400 varies, but generally at least quarterly	EMI and MEMA	State and local public health; healthcare workers	On-line and classroom	-Emergency Operations Coordination - Medical Materiel Management and Distribution	Most activations and exercises have identified need for additional training
Applying ICS to Healthcare Emergency Response	Sept 2014, May 2015	DelValle	Healthcare workers	Classroom	-Emergency Operations Coordination	Evacuation and Surge TTX series

Basic Risk Communications	On-line always available	NWCPHP	Local public health; healthcare workers	On-line	-Emergency Public Information and Warning	Natural Hazard Events
Emergency Risk Communications in Practice	2 offerings planned	LPHI	Local public health; healthcare workers	Classroom	-Community Preparedness -Healthcare System Preparedness -Emergency Public Information and Warning	Natural Hazard Events
Hazard Vulnerability Analysis Planning: Awareness	On-line always available	DelValle	Healthcare workers; LTC; EMS; Public Health	Classroom	-Healthcare System Preparedness	
Emergency Operations Planning: Awareness	On-line always available	DelValle	State, local and private stakeholders from all disciplines	On-line	-Emergency Operations Coordination	Natural Hazard Events
Incident Management for Hospitals	On-line always available	DelValle	Healthcare Leadership	On-line	-Emergency Operations Coordination	Previous real events
HHAN training	On-line always available; classroom as needed	DPH, EPB and Local Public Health Institute	Local public health; healthcare workers	On-line and classroom	-Information Sharing	Previous HHAN drills and real event notifications
MAVEN training	On-line always available	Local Public Health Institute	Local public health; healthcare workers	On-line	-Information Sharing -Public Health Surveillance and Epidemiological Investigation	
WebEOC training	As needed	DPH, EPB	State and local public health; healthcare workers	Classroom now – On-line course being created	-Information Sharing	

Shelter Operations and Functional Needs Support Services	As needed	DelValle	State and local public health; healthcare workers	Classroom	-Mass Care	Natural Hazard Events
Emergency Dispensing Site Management	On-line always available	LPHI	Public Health personnel and MRC volunteers	On-line	-Medical Countermeasure Dispensing	
Environmental Health and Safety Assessment in Shelters	On-line always available	LPHI	Public Health personnel	On-line	-Mass Care	
Emergency Preparedness Begins at Home	On-line always available	LPHI	Public Health personnel and MRC volunteers	On-line	-Community Preparedness	
Emergency Preparedness in Massachusetts	On-line always available	LPHI	Public Health, Healthcare, MRC	On-line	-Community Preparedness	
Legal Nuts and Bolts of Isolation and Quarantine Part I and II	On-line always available	LPHI	Local Public Health and MRC	On-line	-Non-Pharmaceutical Interventions	
Laboratory Response Network training	As needed	State Lab personnel	Hospital Laboratory Staff	Class-room	-Public Health Laboratory Testing	Previous LRN drills
Surveillance of Infectious Diseases	On-line always available	LPHI	Public Health, Healthcare personnel	On-line	-Public Health Surveillance & Epidemiological Investigation	
Public Health Workforce Protection	On-line always available	LPHI	Public Health personnel	On-line	-Responder Safety and Health	